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Delivering Healthcare Services in Resource Constraint Countries Like Pakistan: Sustainable Options

Waris Qidwai

Pakistan is a developing country with limited resources available to counter the rising quadruple disease burden that includes high prevalence of communicable diseases, rapidly rising non-communicable diseases, increasing mental health issues and accidents. This situation is further aggravated by an increasing number of ageing population and its adverse impact on healthcare in communities with limited resources.¹

A health system that has a functioning primary, secondary, tertiary and quaternary level of care available, with required infrastructure including human and material resources required at each level, is the mandatory requirement to offer good quality healthcare at an affordable cost.^{2,3}

Pakistan has resource constraints on one hand and virtually a non-functional public health system on the other hand. The primary care level is inundated with patients with secondary level of care health problems that prevents primary care physicians from focusing on delivering high quality primary care with a strong focus on disease prevention and health promotion.⁴ Since primary care physicians are not trained to deal with secondary care level problems, the quality of services rendered are less than optimum which does not help in dealing and reducing the rising disease burden. Quacks are practicing freely and compromising quality of healthcare being offered to communities at large.⁵ A holistic approach required to ensure delivery of high quality healthcare is lacking due to fragmentation of healthcare in the current healthcare delivery system.⁶

Funds are being spent largely on hospital-based services that reduces the resources required to sustain primary care services in the country. Research is done mostly at hospitals and results of such studies can not be implemented in primary care or generalized to the local population. Guidelines are developed that are again based on hospital-based data and thus can not be implemented in primary care.⁷

Because of lack of properly structured and functional primary care services in the country, patients with primary care level problems are bypassing the system and attending hospital services in both the public and private sectors. Hospital doctors are inundated by primary care level problems that prevents them focusing on and providing care at secondary level. Since hospital doctors are not trained to deal with primary care level of problems, services rendered are less than ideal and does not help in dealing and reducing rising disease burden.⁶

Another major hurdle in dealing with huge disease burden is the issue that government is cutting down its contribution in providing healthcare services to its people. Out of pocket expense for obtaining healthcare services is increasing in the country. It is necessary that government commits a reasonable and substantial amount of funds to support healthcare in the country, at least to support minimum primary care level services.⁸ Alongside, it will be necessary to provide strong regulatory control over healthcare provision in the country.

Private sector healthcare in the country is largely unregulated at present⁹ and causing difficulty in controlling rising disease burden in the country. Due to lack of regulation, quality of healthcare services is compromised and places health and lives of patients at risk.

Resource constraints are hampering efforts to provide healthcare services to the masses particularly the poor and vulnerable. A health insurance cover supported by government funds for the marginalized population is needed.¹⁰

An ideal health system should be aimed at, with required infrastructure at each level of care along with trained and properly qualified staff, and defined role at each level of healthcare, that is monitored and regulated. A system of proper referral between levels of healthcare should be implemented and monitored. Minimum-required finances should be made available, particularly to ensure delivery of essential health services to the poor and marginalized sections of the society.

Healthcare in Pakistan stands at cross-roads today. Unless and until drastic measures are taken on urgent basis, the rising disease burden will not only cripple health of communities, it will impede economic growth

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and development across all areas of society. We make a sincere appeal to policy makers in particular and to all stakeholders in general, to take stock of the deteriorating healthcare in the country and take effective measures to provide essential healthcare services to all sections of the society.

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